## BEST AVAILABLE COPY

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number	Application	or	Docket	١	Num	ıbe
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01440119 AH

CLAIMS AS FILED - PART (Column 1)				(Column 2)			SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS		2.0		(Coldinit E)		l	RATE	FEE	1	RATE	FEE	
EC.	FOR NUMBER FILED		MIME	ER EXTRA		BASIC FEE	370.00	OR	BASIC FEE	740.00		
			IAOIMD	0	ŀ		3, 3.00	UH	-	5.00		
TOTAL CHARGEABLE CLAIMS 20 minus 20=			* /	7/		X\$ 9=		OR	X\$18=			
INDEPENDENT CLAIMS minus			inus 3 =	E	<i>T</i>		X42=		OR	X84=		
ML	ILTIPLE DEPEN	IDENT CLAIM PI	RESENT			+140=		OR	+280=			
* If	the difference	in column 1 is	less than z	ero, ente	r "0" in c	olumn 2		TOTAL		OR	TOTAL	740-0
	С	LAIMS AS A	MENDE	O - PAR	TII					•	OTHER	
_		(Column 1)		(Colu		(Column 3)	_	SMALL		OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT				PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=		X42=		l <sub>or</sub>	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						נ	+140=			+280=		
								TOTAL		OR		
								ADDIT. FEE		OR	ADDIT. FEE	L
		(Column 1)			mn 2) HEST	(Column 3	4		ADDI	1	<del></del>	I ADD!
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVI	BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
WE	Independent	*	Minus	***		=		X42=		OR	X84=	
ľ	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM							
								+140=		OR	+280=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
	-	(Column 1)			mn 2)	(Column 3	)					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER IOUSLY OFOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent		Minus	***		=	]	X42=		1	X84=	
L	FIRST PRESI	ENTATION OF M	ULTIPLE DE	PENDEN	T CLAIM			7,422		OR		<del> </del>
								+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."								OR	TOTAL ADDIT. FEE			
**	*If the "Highest No The "Highest Nu	umber Previously F mber Previously Pa	Paid For" IN Ti aid For" (Total	or Independent	is less that dent) is the	an 3, enter "3." e highest numb	ber fo	und in the ap	propriate bo	x in co	olumn 1.	